U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE	
A1. Building Owner's Name HABITAT FOR HUMANITY					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1509 SADLER DRIVE					Company N	IAIC Number:	
City State GULFPORT Mississippi					ZIP Code 39503		
		nd Block Numbers, Ta ND HOMES, PARCEL			escription, etc.)		
A4. Building Use (e.g	j., Residen	tial, Non-Residential, /	\dditior	n, Accessory, etc.)	RESIDENTIAL	(-27	
A5. Latitude/Longitud	de: Lat. <u>30</u>)-23'07.9"	Long. ع	99-01'20.5"	Horizontal Datur	n: NAD	1927 X NAD 1983
A6. Attach at least 2	photograpi	ns of the building if the	Certific	cate is being used to			
A7. Building Diagram		5					
A8. For a building wit	th a crawls	pace or enclosure(s):					:
a) Square footag	ge of crawls	space or enclosure(s)		D sq ft			
b) Number of per	rmanent flo	od openings in the cra	wispac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 0
c) Total net area	of flood op	enings in A8.b0		sq in			
d) Engineered flo	ood opening	gs? 🗌 Yes 🔲 No	· · · · ·				: -
A9. For a building with	h an attach	ed garage:					
a) Square footag	e of attach	ed garage 0		sq ft			
b) Number of per	manent flo	od openings in the atta	ached (garage within 1.0 fo	ot above adiacent c	ırade	0
		enings in A9,5		sq in			
d) Engineered flo	T#	Years analysis and grant		, "T			ı
		, I 1 + 490 I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•				
		CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community I CITY OF GULFPORT		ommunity Number		B2. County Name HARRISON			B3. State Mississippi
B4. Map/Panel B Number	5, Suffix	B6. FIRM Index Date	E	IRM Panel fective/ evised Date	B8. Flood Zone(s)	(Zor	e Flood Elevation(s) ne AO, use Base nd Depth)
28047C-0269 G		12/21/2017		/2009	"AE"	19.0	և Եգրույ
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
FIS Profile FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9; NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes 🔀 No							
Designation Date				☐ OPA			

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from S	FOR INSURANCE COMPANY USI	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. R 1509 SADLER DRIVE	Policy Number:	
! CHI EDODT	P Code 9503	Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMA	ATION (SURVEY RI	EQUIRED)
*A new Elevation Certificate will be required when construction of the built C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with Complete Items C2.a-h below according to the building diagram specified Benchmark Utilized: GPS USM NETWORK Vertical Datum Indicate elevation datum used for the elevations in items a) through h) benchmark used for building elevations must be the same as that used for the Datum used for building elevations must be the same as that used for the a) Top of bottom floor (including basement, crawlspace, or enclosure floor b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent grade at lowest elevation of deck or stairs, including structural support	dilding Under Constructing is complete. BFE), AR, AR/A, AR/A din Item A7. In Puerton: NAVD88 GEOIDOS low. BFE. or) 22 17 N/A N/A N/A N/A 21 55 15 75 16 80 15 40	Check the measurement used. Check the measur
This certification is to be signed and sealed by a land surveyor, engineer, or and I certify that the information on this Certificate represents my best efforts to intestatement may be punishable by fine or imprisonment under 18 U.S. Code, Section A provided by a licensed land surveyor?	rpret the data avallab ation 1001,	ne. I understand that any false
Certifier's Name GARY A. DURBIN Title SURVEYOR	KT 162 FT NO	Check here if attachments.
Company Name GARY A. DURBIN, P.L.S. Address 2081 TRAILWOOD DRIVE City State BILOXI Mississippi	ZIP Code 39532	Place Of MISS
Signature Date 03/27/2019	Telephone (228) 365-3632	
Copy all pages of this Elevation Certificate and all attachments for (1) community of Comments (including type of equipment and location, per C2(e), if applicable) SITE BENCHMARK PK NAIL IN ASPHALT AT LOT LINE 5/6 ELEV=13.0 C2e AIR CONDITIONER ON WOOD PLATFORM NORTH SIDE OF BUILDING	icial, (2) Insurance ag	ent/company, and (3) building owner.

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/ 1509 SADLER DRIVE	Policy Number:					
, [*]		ZIP Code 39503	Company NAIC Number			
SECTION E - BUILDING ELE FOR ZONE	VATION INFORMA AO AND ZONE A (1	TION (SURVEY NOT WITHOUT BFE)	REQUIRED)			
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
 E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement, 	E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).					
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	Stationary of American Company of the State		s above or below the HAG.			
crawlspace, or enclosure) is	Section 2017	feet meter				
E2. For Bullding Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Se	ection A Items 8 and/or				
E3. Attached garage (top of slab) is	***************************************		s above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is	to the state of th	[] feet [] meters	s above or below the HAG.			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	, is the top of the botto No Unknown.	om floor elevated in acc The local official must c	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWN	ER (OR OWNER'S RI	EPRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e statements in Section	ons A, B, and E for Zons A, B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's						
Address	City	Sta	ate ZIP Code			
Signature	Date	Tel	ephone			
Comments	CONTRACTOR					
			!			
	•		Check here if attachments.			

ELEVATION CERTIFICATE

Bui	OK IA	NT: In these spaces, copy the o	corresponding information	on from Section A.		FOR INSU	RANCE COMPANY USE
100	9 SAL	Street Address (including Apt., Un DLER DRIVE	it, Suite, and/or Bldg. No.)	or P.O. Route and Bo	x No.	Policy Nun	nber:
GUI	LFPO	RT	State Mississippi	ZIP Code 39503		Company I	NAIC Number
<u> </u>		SEC	CTION G - COMMUNITY	NFORMATION (OPTI	IONAL)		
		official who is authorized by law on A, B, C (or E), and G of this Elevaters G8–G10. In Puerto Rico only		the community's flood the applicable item(s)	plain man and sign	agement or below. Che	dinance can complete ck the measurement
G1.		The information in Section C was engineer, or architect who is auth data in the Comments area below	CULCULIV IMW ROCMIIIW AIA	ntation that has been s vation information. (Ind	signed an dicate the	d sealed by source and	a licensed surveyor, I date of the elevation
G2.		A community official completed S or Zone AO.	ection E for a building loca	ated in Zone A (withou	t a FEMA	-issued or c	ommunity-issued BFE)
G3,		The following information (Items (G4–G10) is provided for co	ommunity floodplain ma	anageme	nt purposes	.
G4.	Perm	it Number	G5. Date Permit Issu	led	G6. Da	ate Certifica ompliance/C	te of occupancy tssued
G7.	This	permit has been issued for:	New Construction	Substantial Improven	nent	87/87/2011	A.
G8.	Eleva of the	ation of as-built lowest floor (include building:	ding basement)	, manufactured	☐ feet [meters	Datum
G9.	BFE	or (in Zone AO) depth of flooding	at the building site:	The same of the sa	☐ feet [meters	Datum
		munity's design flood elevation:	Man approxim ation	F MANAGEMENT WAS	feet [meters	Datum
Local	Offici	al's Name	49 / 197 1988 A. 1992 A.	Title	· · · · · · · · · · · · · · · · · · ·	(A)	
Comn	nunity	Name	anning page and the second	Telephone	·		
Signa	ture			Date		A	
Comn	nents	(including type of equipment and	location, per C2(e), if appli	cable)			
							;
							į
		-				☐ Chec	k here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008
Expiration Date: November 30, 20

	INDOMITANTS IS ALSO			expiration pate. Novelibel 30, 2018
	IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE		
İ	Bullding Street Address (including Apt., Unit, to 1509 SADLER DRIVE	Policy Number:		
	City GULFPORT	State Mississippi	ZIP Code 39503	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page,

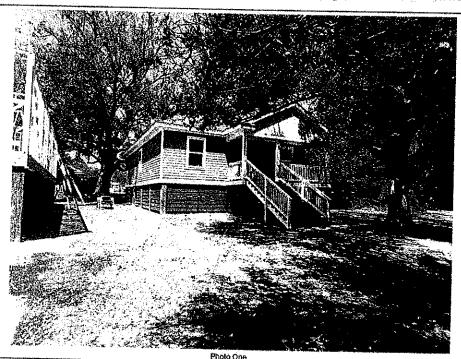


Photo One Caption 03/27/2019 FRONT



Photo Two Caption REAR

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, a 1509 SADLER DRIVE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
GULFPORT	Mississippi	39503	Company 19510 Hamber
If submitting more photographs than will fit with: date taken; "Front View" and "Rear photographs must show the foundation with	r view and it required	"Minht Side Vieur" and "	"Left Side Views" Whose emplicable
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Photo One Caption	Photo One	<u>e</u>	The state of the s
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